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ICANotes Behavioral Health EHR

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SOS
610 N. Silver St
Silver City, NM 88061

575-956-6131
575-956-6947

Medicaid ID: YIF915103969

Armendariz Barela, Eva

ID: 1000010729151 DOB: 6/19/1972

Case Management Note (SOS)

Use Note Creation Time
Clear Time
Set Date/Time

7/26/2023
8:45 PM

Service Locations

Audit Log

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Presenting Problem:
Symptoms of an adjustment disorder are present.
Eva continues to experience anxiety.
Symptoms of depression continue to be described.

Recent History:
Client has a history of chronic homelessness, substance abuse, anxiety, depression, PTSD, and impairment in the functional domains of independent living, working, and recreation.

Social Support Changes:
No changes in Eva's family or social support network have occurred.

Intervention:
Client was assisted with hygienic necessities so that she may maintain proper self care.

Assessment:
Eva presents as flat, minimally communicative. She exhibits speech that is normal in rate, volume, and articulation and is coherent and spontaneous. Language skills are intact. Mood cannot be assessed. There are signs of anxiety. There are no signs of hyperactive or attentional difficulties. Eva's behavior in the session was cooperative and attentive with no gross behavioral abnormalities.

Plan:
Continue accommodating client to the best of shelter abilities and prompt client to participate in programming plans.

Diagnosis: Post-traumatic stress disorder, chronic, F43.12 (ICD-10) (Active)
Adjustment disorder with mixed anxiety and depressed mood, F43.23 (ICD-10) (Active)

History of Risk Factors:

- *History of Abuse:
 - Physical abuse
- *History of Alcohol or Substance Abuse

Current Risk Factors:

- *Absent or Weak Support System:
- *Experiencing Severe Anxiety or Panic
- *Severe Financial Difficulty
- *Feelings of Hopelessness, Worthlessness, or Guilt are Present:
- *Rapid Shifts in Mood are Occurring